

# Fermi National Accelerator Laboratory

## Personal Data Form

Employee ID	Employee Name (last name, first name, middle initial)	Preferred Name	Prefix
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Home Address	City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Home Phone (include area code)	Date of Birth	Social Security No.	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

<b>PERSONAL DATA</b>		<b>RACE - CHECK ONE</b>	
<b>GENDER</b>	<b>Marital Status</b>	<input type="checkbox"/> American Indian or Alaskan Native	<input type="checkbox"/> Native Hawaiian or other Pacific Islander
Female <input type="checkbox"/>	Married <input type="checkbox"/>	<input type="checkbox"/> Asian	<input type="checkbox"/> Hispanic or Latino (white race only)
Male <input type="checkbox"/>	Single <input type="checkbox"/>	<input type="checkbox"/> Black or African American	<input type="checkbox"/> Hispanic or Latino (all other races)
<b>HANDICAP-DESCRIBE BRIEFLY</b>		<input type="checkbox"/> White	
		<b>MILITARY STATUS-CHECK ONE IF APPROPRIATE</b>	
		<input type="checkbox"/> Vietnam Era Veteran	<input type="checkbox"/> Disabled Veteran
		<input type="checkbox"/> Other Eligible Veteran	
<b>ARE YOU A U.S. CITIZEN ?</b>			
YES: _____ NO: _____		IF NO, STATE CITIZENSHIP: _____	
<b>VISA TYPE: _____</b>			
<b>EXPIRATION DATE: _____</b>			
<b><u>EDUCATION COMPLETED</u></b>			
Degree	Year	Institution	Major
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

### POLICY STATEMENT ON HUMAN RIGHTS

I have received a copy of the Laboratory's "Policy Statement on Human Rights". (This statement is in the section entitled FOR YOUR INFORMATION ....)  
**(ALL SECTIONS MUST BE COMPLETED)**

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

rec-2  
Jan-06